

Staple Issue Slip Here

**BEST AVAILABLE COPY**

POSITION	ID NO.	DATE
CLASSIFIER		
EXAMINER	104652	1/27/90
TYPIST		
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

**INDEX OF CLAIMS**

Claim	Final	Original	Date
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**SYMBOLS**

- ✓ ..... Rejected
- o ..... Allowed
- (Through numeral) Canceled
- + ..... Restricted
- N ..... Non-elected
- I ..... Interference
- A ..... Appeal
- O ..... Objected



Claim		Date	
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